## UTILITY PATENT APPLICATION ATTORNEY DOCKET 82602THC TRANSMITTAL UNDER 37 CFR 1.53(b) Customer No. 01333 fio: Commissioner for Patents Express Mail Label No. 53 Box Patent Application Washington, D.C. 20231 EL656965078US Date: april 1/2 2001 ERSONALIZED MOTION IMAGING SYSTEM ≣ 0 First Named Inventor (or Application Identifier): Ronald S. Cok Enclosed are: X Specification 6. Assignment of the invention to Eastman Kodak Company 2. Sheet(s) of drawing(s) 7. Certified copy of a priority document. Associate Power of Attorney Information Disclosure Statement Under 37 CFR 3. 8. 1.97. Combined Declaration for Patent Application and Power of Attorney: 4. **I** Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed) 4b. ij Incorporation by Reference (useable if Box 4b is Deletion of Inventor(s). ليدا checked) The entire disclosure of the prior application, from Signed statement attached deleting inventor(s) named which a copy of the oath or declaration is supplied under Box 4b, in the prior application, see 37 CFR 1.63(d)(2) and is considered as being part of the disclosure of the accompanying 1.33(b). Ħ application and is hereby incorporated by reference therein. IJ 10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, 11 after the title, by inserting the following: -- CROSS REFERENCE TO RELATED APPLICATION Reference is made to and priority claimed from U.S. Provisional Application Serial No., lab filed, entitled. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: 1 11. Continuation Divisional Continuation-in-part (CIP) of prior application No:, Please address all written communications to Thomas H. Close, Patent Legal Staff, 12. Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201. Please Direct all telephone calls to Thomas H. Close at (716) 722-2396. The filing fee has been calculated as shown below: FOR: NO. FILED NO. EXTRA **RATE** FEE BASIC FEE \$ 710 TOTAL CLAIMS 17 -20 =0 x 18 =\$ 0 INDEPENDENT CLAIMS 1 - 3 = 0 x 80 =\$0 MULTIPLE DEPENDENT CLAIM PRESENTED +270\$0 TOTAL \$ 710 Please charge my Eastman Kodak Company Deposit Account No. 05-0225 in the amount of A duplicate copy of this sheet is enclosed The Commissioner is hereby authorized to charge any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225.

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A duplicate copy of this sheet is enclosed.